FEE TRANSMITTAL

Complete If Known			
Application Number			
Filing Date			
First Named Inventor	David A. Stutsman		
Group Art Unit			
Examiner Name			
Attorney Docket Number	20153		

TOTAL AMOUNT OF PAYMENT (\$) 420.00	Attorney Docket Number 20153					
METHOD OF PAYMENT (Check one)						
1. The Commissioner is hereby enthorized to charge indicated fees and credit any over payments to:	3. ADDITIONAL FEES					
Depoel	Large Entity Small Entity Fee Fee Fee Fee Code (5) Fee Description	Fee Paid				
Account 12-0429	105 130 205 95 Surcharge - Isla filling fee or oath					
Account Lalos & Keegan	127 50 227 25 Surchespe - Inte provisional fling fee or cover shoot.					
Charge Any Additional Charge the Issue Fee Set in 37 See Registral Uniter 37 CFR 1.16 at the Mailing of the	139 130 139 130 Non-English specification					
CFR 1.16 and 1.17 Hotics of Allowance, 37 CFR	147 2,460 147 2,460 For fiting a request for reexamination					
2. [x] Payment Enclosed:	112 900' 112 900' Requesting publication of SIR prior to Examiner action					
Check Money Other	113 1,790 113 1,790 Requesting publication of SIR after Examiner action					
FEE CALCULATION (fees effective 10/01/98)	115 110 215 55 Extension for response within first month					
	116 300 216 196 Extension for response within second month					
1. FILING FEE	117 930 217 465 Extension for response within third month					
Large Entity Small Entity Fee Paid Fee Paid	118 1,470 218 735 Extension for response within fourth month					
Fee Fee Fee Fee Description Fee Paid Code (5) Code (5)	119 300 219 160 Notice of Appeal					
101 770 201 385 Utilky King fee 380	129 300 220 150 Filing a brief in support of an appeal 121 280 221 130 Request for onli hoaring					
108 320 208 160 Design filing fee	northean age to the test that a set of the amount of					
107 530 207 265 Plant (Bing fee	1 100 17110 100 17111					
108 770 208 385 Rolsave fling fee	149 110 240 66 Petition to revive unavoidably ebandoned application					
114 150 214 78 Provisional Ming fee						
SUBTOTAL (1) (\$) 380.00	abendoned application					
Fee from	142 1,290 242 645 Utility leave fee (or release)					
2. CLAIMS Extra below Fee Para	143 440 243 220 Deciga leave fee					
Total Claims 20 -20 = 0 X 9 = 00	144 650 244 326 Plant lissue fee					
Independent $3 - 3 = 0 \times 39 = 00$	The second secon					
Multiple Dependent Claims X =	and the second second information Displaceure Sirel					
	120 200 100 000 000 000 000 000 000 000					
Large Entity Small Entity Fee Fee Fee Fee Description	581 40 581 40 Recording each patent assignment per properly (times number of properties)	40.00				
Code (5) Code (5) 103 22 203 11 Claims in excess of 20	146 770 246 385 Filing a submission after final rejection (37 CFR 1.129(a))					
102 80 202 40 Independent claims in excess of 3	449 770 240 386 For each additional invention to be					
104 260 204 130 Multiple dependent claim	examined (37 CFR 1.129(b))					
109 80 209 40 Relissue Independent claims over original potent	Other fee (specify)					
Palestia cisims in excess of 20	Char ise (specify)					
110 22 210 11 and over original patent		40.00				
SUBTOTAL (2) (\$) 00	SUBTOTAL (3)	+0.00				
	*Reduced by Basic Filing Fee Paid	_				

			Complete (f applicable)		
SUBMITTED BY Typed or	Peter N. Lalos				19,789
Printed Name		Date	4/13/99	Deposit Account User ID	
Signature		The will very depending upon the needs of the indi			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for patents, Washington, DC 20231.